



The Medical Outcomes Study 12-Item Short Form Health Survey (SF-12) is a nationally standardized health questionnaire used widely in clinical settings and survey research to measure self-reported health. It is composed of twelve questions (subdivided into eight sub-domains of health) that are weighted to provide two scales, the Physical Composite Scale (PCS) and Mental Composite Scale (MCS). Each scale ranges from 0 to 100 with a national mean of 50 and standard deviation of 10. The SF-12 is used extensively in health science research. Some of its uses include the tracking of differences before and after an intervention, and observing differences between subgroups, such as persons in poverty, or those with various medical conditions. For this report, SF-12 scores have been tabulated by a variety of demographic, socioeconomic, lifestyle factors and health conditions variables in order to provide a picture of the health status of different groups of adults in Utah.

- The physical health status of Utahns is very similar to the U.S. overall. In fact there is no notable difference in physical health status for different age groups in Utah compared to the U.S.
- The mental health status of Utahns was above that of the U.S. for every age group. Mental health status improves with age at both the state and national levels.
- Although women tend to live longer than men, their self reported physical and mental health status was significantly lower. These sex differences are probably due to a combination of factors, including actual health status and differences in response tendencies among men and women.
- Socio-economic indicators (income, education level, poverty level) are strongly related to health status. It is not clear whether SES influences health status or health status influences educational attainment and income earning potential. It is likely that all are mutually reinforcing to one another.
 - For example: Utahns with higher levels of education had significantly better physical and mental health status than Utahns with low levels of education. Similar associations hold for health status and education, income level, and poverty level.
 - Interestingly, the tendency for men to report better physical and mental health than women was not affected when SES factors were included in analysis.
- The presence of chronic and medical conditions including; chronic obstructive pulmonary disease, stroke, diabetes, heart disease, obesity and high blood pressure were associated with significantly lower physical and mental health status for men and women. However, women with chronic illnesses or medical conditions tended to have poorer health outcomes than men with the same conditions.
- Utahns who have a chronic or medical condition, and live in households with incomes less than 100% of the Federal Poverty Level have significantly poorer health than Utahns with chronic and medical conditions who live above 100% of poverty.
- Only about one third of Utahns with below average mental health reported seeking professional counseling. Persons with poor mental health were less likely to seek professional help in older age groups.
- Utahns with below average physical or mental health have significantly more outpatient medical visits and were more likely to have been hospitalized in the last twelve months.



This association is stronger for older Utahns. This information will be valuable for predicting future health care system needs as the population continues to age.

- Characteristics of persons with below average physical or mental health, as a group, mirror those of Utah's overall population fairly closely. They are, however, more likely to be women, age 18-34, with less than a high school education, married, working full time, non-Hispanic, or earning \$20,000 to \$45,000 per year.